Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10807098

		:	SMALL	ENTITY		OTHE	RTHAN					
<u> -</u>			(Colum	(Column 1)		(Column 2)		TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			29					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			99 (minus 20=		.9			X\$ 9=	81	OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =					X43=	43	OR	X86=	
М	ULTIPLE DEPE	NDENT CLAIM F	PRESENT					+145=		OR	+290=	
* 1	f the difference	e in column 1 is	less than z	ero, enter	"0" in (column 2	Ĺ	TOTAL	509	OR	TOTAL	
CLAIMS AS AMENDED - PART II										_	OTHER	THAN
		(Column 1)		(Column 2) (Co				SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	01.414.4	= .		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
1272829								TOTAL DDIT. FEE		┤ ॢॱ	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	ın 2)	(Column 3)	, ,			•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	DETIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
\cdot								TOTAL		ľ	TOTAL	
ADDIT FEEON ADD											DDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
Z	•	REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	//00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		per Previously Paid					found	in the app	ropriate box	in colui	mn 1.	